

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	80	71058	10/29/99
O.I.P.E. CLASSIFIER		8	1-4-99
FORMALITY REVIEW		608574	11-15-99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	A
2	✓	✓	A
3	✓	✓	A
4	✓	✓	A
5	✓	✓	A
6	✓	✓	A
7	✓	✓	A
8	✓	✓	A
9	✓	✓	A
10	✓	✓	A
11	✓	✓	A
12	✓	✓	A
13	✓	✓	A
14	✓	✓	A
15	✓	✓	A
16	✓	✓	A
17	✓	✓	A
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24	✓	✓	A
25	✓	✓	A
26	✓	✓	A
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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